



# AFFIDAVIT OF FORGERY

MEMBER INFORMATION						
Member Name		Member Number				
Daytime Phone		Evening Phone		Cell Phone		
Mailing Address			City	State	Zip	
<b>Forged Instrument(s):</b> <input type="checkbox"/> Check <input type="checkbox"/> Share Draft <input type="checkbox"/> Withdrawal Voucher <input type="checkbox"/> Loan Note (including Co-maker Forgery) <input type="checkbox"/> Other _____						
<b>On the Instrument(s) I am named as the:</b> <input type="checkbox"/> Payee/Endorser <input type="checkbox"/> Maker (face of draft or on note) <input type="checkbox"/> Co-Maker (loan) <input type="checkbox"/> Account Owner						
Date Loss Discovered		Date Loss Reported to Credit Union		Date of First Fraudulent Transaction		
<b>The Signature for each Instrument(s) listed below and attached to this affidavit was not written nor authorized by me and is a Forgery:</b>						
Date	Number	Amount		Date	Number	Amount
Name and Address of Unauthorized Signer (if known)						
<b>Police Report Details (Anchorage Police Department: Records Department 786-8600)</b> <i>(This is a requirement, the claim will not be processed until a case number is provided)</i>					Case #:	

## SIGNATURES

I give my consent to the credit union to release any information regarding my account to any local, state and/or federal law enforcement agency so that the information can, if necessary, be used in the investigation and/or prosecution of any person(s) who may be responsible for fraud involving my account. Further, I understand I may be required to comply with a court order or subpoena to give testimony. I swear this affidavit is true and understand that making a false sworn statement is subject to federal and/or state statutes and may be punishable by fines and/or by imprisonment.

**NOTICE:** Any person who knowingly and with intent to injure, defraud or deceive any insurance company, submits a statement of claim containing any false, incomplete or misleading information commits a crime.

**Sign your name five times:**


State of \_\_\_\_\_ Judicial District \_\_\_\_\_

Subscribed to and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_

Notary Public \_\_\_\_\_

Prepared by Operator # \_\_\_\_\_

